MH 654A Revised 12/11/12

MEDICATION SUPPORT SERVICE ADDENDUM

(For use by MD/DO, NP and students of these disciplines)

Date:		
Please note which sections of the form checked below are of	continued or addressed in this note:	
MH 657 Initial Medication Support Service		
 MH 653 Complex Medication Support Service MH 655 Brief Follow-up Medication Support Service 		
Introde Brief Colon up incurcation cupper convice		
Signature & Discipline Date	Co-signature & Discipline	Date
This confidential information is provided to you in accord with State and		IS#:
Federal laws and regulations including but not limited to applicable Welfare and Institutions code, Civil Code and HIPAA Privacy Standards. Duplication	Name:	
of this information for further disclosure is prohibited without prior written authorization of the client/authorized representative to whom it pertains	Agency:	Provider #:
unless otherwise permitted by law. Destruction of this information is required after the stated purpose of the original request is fulfilled.	Los Angeles County – Departmen	t of Mental Health